HEALTH AND SOCIAL SERVICES RECOVERY TASK FORCE July 7, 2011

State Coordinator: Jessica Dent, <u>Jessica.dent@adeca.alabama.gov</u>

Attending:

Nancy Graves City of Tuscaloosa

Shannon Byrd Alabama Department of Mental Health
Russ Black Alabama Department of Senior Services
Heather Reed Alabama Primary Health Care Association
Ron Gilbert Association of Community Action Agencies

Kristin Gardner The Jones Group

Margaret Whatley Alabama Finance Director's Office

Debora Clay Volunteers of America

Katrina Magdon Alabama Nursing Home Association Kandis Steele Alabama's Community Colleges

Jane Reeves Emergency Preparedness, Ala Dept of Public Health
Carolyn Bern Primary Care & Rural Health, Ala Dept of Public Health
Cynthia Burton Community Service Programs of West Alabama

Sue Barrett Family Guidance Center of Alabama Stephen Bridgers Literacy Council of West Alabama

Shane Bailey ADECA

Albie Lewis FEMA, Federal Disaster Recovery Coordinator

Elizabeth Crossland
Victoria Salinas
FEMA, National Housing Task Force
FEMA Long Term Community Recovery
FEMA Long Term Community Recovery

Recommended additions to task force and/or include in future meetings:

Network of Family Resource Centers

Alabama Department of Human Resources

Alabama Disabilities Advocacy Network

Governor's Office on Disabilities

Low Income Housing Coalition of Alabama

Project Rebound

Center for Community Based Partnerships, University of Alabama Center for Ethics and Social Responsibility, University of Alabama

Alabama Emergency Management Agency

FEMA Individual Assistance

FEMA VAL

<u>Summary</u>

Task force attendees included representatives from FEMA and other federal agencies, ADECA and other state agencies, nonprofits and service providers. This was an organizational meeting to get a general idea of what resources are available in the Health and Social Services area to meet the long term needs of affected communities. Needs assessments are in progress. The agencies were asked to provide any existing assessments completed in the last year to 18 months. This will help provide baseline information and avoid duplication of effort.

Emerging Issues

- Prioritizing of senior citizens and nursing home residents in disaster response.
- High demand for mental health counseling.
- Health care delivery impacted by loss of National Health Service clinics.
- Impact on low-income neighborhoods. Loss of affordable housing options.
- Need for financial counseling of individuals receiving lump sum assistance.
- Health Centers not activated by EMA and therefore not eligible for reimbursement.
- Need for education in long term planning and goal setting for individuals.
- Clear communication of SBA loans' availability to individuals.

Action Steps

- Provide any needs assessments done by an agency or organization in the last year to 18 months.
- Next meeting: July 13, Tuscaloosa

Meeting Notes

Jessica Dent chaired the organizational meeting of the Health and Social Services Task Force.

This is a partnership among ADECA and its state partners, FEMA and its federal partners, the nonprofit community, and the private sector. Task forces are organized in the same categories as FEMA's Recovery Support Functions. FEMA's Long Term Community Recovery process is a technical assistance program for communities with a large impact and less capacity to recover. There are FEMA/ADECA teams already set up in some communities.

The task forces are designed to be a resource pool, providing expertise, knowledge and information to help communities recover. We want to help communities beyond the response and assistance phase, and help them take ownership of their long term recovery.

Jessica said this is an opportunity for communities to be involved in a planning process; for some it will be the first time. We can help prepare communities to excel, by leveraging our expertise. The effort will always be led by the community itself.

The difference was explained between Long Term Community Recovery, which involves the Task Forces, and Long Term Recovery Committees, which address individual and household needs. Long Term Community Recovery is a visioning and planning process, with FEMA providing technical support for communities to plan for the future.

ADECA has been designated the lead agency for long-term recovery. ADECA coordinates state agencies and the Task Forces; FEMA coordinates federal agencies.

The Health and Social Services Task Force will look at medical, mental health and social services, placement of displaced persons, and other issues that affect a community's long term plans. Each community will determine what direction they want to take; our Task Force organizations and agencies will provide the resources. Seeking and applying for grants will likely be a major focus. We can team up and leverage our partnerships. There is never a guarantee, but if you combine a documented need with a team of state, federal and local support, your request is much stronger.

We will plan first, then worry about the money. The plan comes first; it includes existing resources and community assets. We know we have strong communities, because we saw their response immediately after the tornadoes. Fewer people are asking for FEMA assistance; we are already rebuilding houses.

This task force can help identify emerging health and social services needs. There was significant damage in low-income areas, and we can help community organizations meet those additional needs.

Kandis Steele, Alabama's Community Colleges: We have been involved in response and recovery since Day One. Our campuses served as planning sites and staging for crews and materials. Our faculty and staff have worked in the communities.

Katrina Magden, Alabama Nursing Home Association: A nursing home was destroyed in Tuscaloosa, and we did not get any help. We were fortunate to have no injuries, due to our staff and training. But we had to go find our own transport to move our residents. In Pleasant Grove, they wanted to turn off the natural gas which runs our generators. We were told that our residents were not a priority because there were no injuries or deaths. The nursing home community worked together, and we are working on a plan that addresses what did not work. We want to make sure nursing home residents are considered a priority in future disasters.

Sue Barrett, Family Guidance Center of Alabama: Our major focus is Jefferson County. We are taking about 480 calls a month, with a staff of five. The first response was not well coordinated and there was a lack of communication. We are coordinating resources and helping other agencies. There is a real need for people to help families set up a goal plan, which most did not have in the first place. Their support networks are gone. Employment is a big issue – their employer might be gone, and employment assistance is overwhelmed. This is on top of a poor employment picture before April 27. We have been inundated by requests for therapeutic counseling services. We are an affiliate agency with the Long Term Recovery Committee.

Carolyn Bern, ADPH Primary Care and Rural Health: We work on access to health care for underserved, uninsured and disadvantaged residents. We work with the National Health Service. We lost two sites, and had to relocate the physicians. This means the people in those communities had to find another place for health care. We can help from a planning perspective by assessing where patients are going now, what the healthcare needs are now, and how health care access can be included in the plan.

Jane Reeves, ADPH Emergency Preparedness: We are part of FEMA ESF-8, Public Health and Medical Services. We brought a mobile unit to Hackleburg. We have an emergency preparedness team and we use the ESF8 assessment tool. We have five after-action reviews from hospitals related to the tornados and have learned a lot from them.

Cynthia Burton, Community Service Programs of West Alabama: We administer social service and housing programs. Ms. Burton is chair of the board of the local community health center, and chair of the Association of Community Action Agencies (Ron Gilbert, executive director, is at the meeting). Our agency had no power or water for three days, but none of our buildings was hit. We helped obtain donations and supplies to distribute.

We are concerned about Alberta City in Tuscaloosa, the Rosedale Court residents and the Geiger area in Sumter County. The Rosedale Court housing community was in the planning state for a renovation before the tornado destroyed it. Public housing could be re-built with less density, which is good, but it will mean fewer units available.

Affordable housing will be a problem in Tuscaloosa, particularly in Alberta City. There were many absentee landlords. The city, the University and developers will offer a lot of money for that land. The Hispanic community is also a concern.

This is an opportunity to rebuild the community so it is more inclusive.

Shannon Byrd, Alabama Department of Mental Health: We manage and implement crisis counseling programs for FEMA including Project Rebound. We just received the letter of approval for funding. There are 12 mental health centers serving as leads. We will hire 250 counselors to cover 31 counties. Their role is short term empowerment and resiliency, while Project Rebound is more long term. We need to know about the long term needs as well as educate counselors about how to access support for their clients.

Stephen Bridgers, Literacy Council of West Alabama: We serve a nine-county area. Our service providers teach literacy skills, not just reading but also financial, health and workforce development. One of our focus areas was acquiring books; we hope West Alabama will have more books than before. After the tornado, we received donations from literacy councils in other states.

We have a proposal to implement a workforce development project that was created by and for the construction industry and successful in Houston and New Orleans after disasters. It combines construction training and literacy to develop a workforce that can handle the rebuilding that will come.

We are also seeking funding for family resource centers which would provide education for children, parents and whole families. Literacy is never the only issue with an individual.

The community colleges are a partner in our projects; we all met a few weeks ago.

Russ Black, Office of Senior Services: About 30,000 seniors have registered for disaster assistance. Housing is an issue; many are now living with family members. We had representatives at the DRCs from the beginning and had resource guides within three days. We are not a service provider but rather a coordinator. After Hurricane Katrina, we now have 21 safe centers in the state. Three senior centers were destroyed. After the storms in early April, we had our nutrition program staff provide shelf-stable meals in advance to our clients.

Heather Reed, Alabama Primary Health Care Association: We represent 120 federally-qualified health centers. We realized that our centers were not connected with EMA as they should be. They were not activated and therefore cannot be reimbursed for some disaster-related services. We want to make the connections to address this issue.

Ron Gilbert, Community Action Agency Association: We have 21 agencies serving all 67 counties. The services they provide vary according to location and community needs. They are providing the same services as before, not necessarily directed only to recovery. Our population was suffering before the storm and faces challenges in recovering. Long term housing is an issue. Our clients do not have a lot of experience with long term planning. As time passes, our volunteers and donated resources diminish but many people still have basic needs that have not been addressed. Considering what happened, things are relatively stable but it is hard to say what it will look like long term.

We all get information every day about long term recovery meetings. So many people are using that title that it looks like a very scattered approach.

Kristin Gardner, The Jones Group: We are a lobbying and public affairs firm, and have several clients who are in the health and social services area. I am from Rainsville and my family is involved in the recovery process.

John Boyle, FEMA LTCR: I work with the teams we have in the field. They are embedded in the community, building relationships. We are just starting in the more urban areas. In Tuscaloosa, we are observing their process; they hired a consultant to do the visioning and we expect to provide technical support for implementation. We are starting with the Holt Community in Tuscaloosa County.

The key things we have heard are issues with the elderly, health care, public housing and workforce training. A big concern is the gap in rebuilding housing, because the cost of rebuilding will mean you have to charge higher rent. Many small business owners did not have a business plan, and now their business and their

market are gone. Also, people receiving big checks do not understand the financial implications and how to use the money. An issue even before the tornado was losing the youth population, and that could get worse.

The next step is to complete needs assessments, which we will coordinate with your organizations. With this information, we can share among all of us, identify needs and potential partners.

Community Action Agencies are required to do needs assessments every two years. We could use the existing ones as a starting point. ADECA should have them.

Any agency that has done a needs assessment in the last year or so is asked to provide it to the task force. This could save us a lot of time and effort not re-doing something that is already done. Some assessments are narrowly focused but we can put them together.

One suggestion was to create a survey of 8 to 10 questions for each Task Force category, and use that as a needs assessment from member agencies.

John Boyle explained that in the community visioning meetings, residents are encouraged to "dream big." That's not easy to do in a community that's been beat down in the past. We work to create a mission and vision for the future, then identify the key things that they need to achieve that vision. The end result is something they can hold in their hand and show you what resources they need.

Other issues:

Communicate with IA to clearly identify SBA assistance as available to individuals.

Work to provide financial counseling for individuals receiving large assistance checks, delivery system that provides an opportunity for education and avoiding scams.